

CONFIDENTIAL



PERSONAL FINANCIAL STATEMENT

All owners/guarantors/partners of this request must complete a statement. Copies may be made, if necessary.

Financial Condition as of _____, 20____

Name _____ Social Security Number _____

Address _____

Date of Birth _____ Years at Present Address _____

Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____

Employer _____ Years at Present Employer _____

Position _____

ASSETS		LIABILITIES	
Cash in PSECU	\$ _____	Mortgages Payable (Schedule C)	\$ _____
Cash in other financial institutions (Schedule A)	\$ _____	Notes Payable - Secured (Schedule D)	\$ _____
Marketable Securities (Schedule B)	\$ _____	Notes Payable - Unsecured (Schedule D)	\$ _____
Life Ins. Cash Value	\$ _____	Notes Payable to Relatives (Schedule D)	\$ _____
Real Estate Owned (Schedule C)	\$ _____	Loans on Life Insurance	\$ _____
Loans Receivable	\$ _____	Taxes Payable	\$ _____
IRAs, Pensions, KEOGH	\$ _____	Other Liabilities (itemize)	\$ _____
Automobiles	\$ _____	_____	\$ _____
Other Assets (itemize)	\$ _____	_____	\$ _____
_____	\$ _____		
_____	\$ _____		
		Total Liabilities	\$ _____
		Total Assets	\$ _____
Total Assets	\$ _____	Total Assets minus	\$ _____
		Total Liabilities	\$ _____

Schedule A - CASH IN OTHER FINANCIAL INSTITUTIONS				
Financial Institution Name	Account Type	Account Owner	If Pledged, to Whom?	Current Balance

Schedule B - MARKETABLE SECURITIES				
# of Shares	Description	Account Owner	If Pledged, to Whom?	Market Value

Schedule C - REAL ESTATE OWNED/MORTGAGES PAYABLE							
Address of Property	Owner	Date Acquired	Market Value	Interest Rate	Pmt	Current Balance	Lender

Schedule D - NOTES PAYABLE (Secured, Unsecured, and to Relatives)					
Creditor/Relative	Account Type	Pmt	Current Balance	Collateral	Maturity Date

ADDITIONAL INFORMATION		
<i>Contingent Liabilities</i>	Yes*	No
Have you, or any firm in which you were a major owner, ever filed bankruptcy?		
Are you a party to any lawsuit or any legal proceeding?		
Are you contingently liable for any leases or contracts?		
Are you a Guarantor, Co-Maker, or Endorser on any other debt?		
Are any tax obligations past due?		
Do you have a will or estate plan established?		

* Please explain all Yes answers. Attach additional sheet(s), if necessary.

This financial statement is given to PSECU by the person signing this statement in connection with an application for credit or extensions of credit for such person or to another based upon the guaranty of such person. The person signing this document agrees that PSECU is entitled to rely upon the information in this statement in its credit decision relating to such person or to another based upon the guaranty of such person. The person who signs this financial statement certifies and agrees that: (1) the information provided in this statement is true and complete and gives an accurate description of such person's financial condition, except as listed in this statement, (2) such person has no undisclosed contingent liabilities, and (3) title to all listed assets is solely in the name of such person and no other person or entity has an interest in such assets, unless otherwise noted in this statement. In the event of any change in such person's name, address, or employment, such person agrees to send written notice to PSECU within five (5) business days after such change has occurred. The person who signs this agreement further agrees to send written notice to PSECU with five (5) business days after any occurrence of any material or adverse change: (A) in any of the information contained in this statement, or (B) in the ability of such person to perform his/her obligation which is/are owed to PSECU, or, (C) in the financial condition of such person. If no such written notice is given, PSECU shall be authorized to consider this statement as a continuing statement, correct in all respects. PSECU hereby is authorized to request a consumer report on any person signing this statement in connection with the present application for credit or any update, renewal, or extension of such credit. Upon your request, PSECU will tell any such person whether or not a consumer report was requested and the name and address of the consumer reporting agency that furnished the report. The person signing this statement further authorizes PSECU to make all necessary inquiries to verify the information in this statement and also authorizes all such persons or entities PSECU contacts to completely respond to such inquiries.

SIGNATURE _____

DATE _____

INSURED BY NCUA.